16/29/20

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999							841343738					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							LL I	NTITY	OR	OTHER SMALL E		
FO	R .	NUMBER	FILED	NUMBER E	XTRA	RA	Έ	FEE		RATE	FEE	
BAS	SIC FEE			<u> </u>				345.00	OR		690.00	
то	TAL CLAIMS	50 minus 20= * 30				X\$	9=	220	OR	X\$18=		
ND	EPENDENT CLAIMS	19	\sqrt{g} minus 3 = \sqrt{g}			Х3	9=	624-	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT						+13	0=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT	AL	1231	OŖ	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							ALL	ENTITY	oŔ	OTHER SMALL		
AMENDMENT A	RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total *	(A)	Minus	50	= 30	X\$	9=	225	OR	X\$18=	6	
ME	Independent *	001	Minus	19	= 2	ж	9=4	184	OR	X78=		
	FIRST PRESENTAT	ION OF MU	LTIPLE DEPI	ENDENT CLAIM		+13	3O=	, ,	OR	+260=		
\mathcal{O}							OTAL FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT B	H RE	CLAIMS EMAINING AFTER IENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ZDME	Total •	, ,	Minus	80	= 🚫	X\$	9=		OR	X\$18=		
AME	Independent *	19'	Minus	ENDENT CLAIM	= ()	ХЗ	9=		OR	X78=		
\vdash	FIRST PRESENTA	TION OF MU	LIPLE DEP	ENDENT CLAIM	·	+13	30=		OR	+260=		
							OTAL FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS EMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE [.]	ADDI- TIONAL FEE	
	Total *	61	Minus	80	=	X\$	9=		OR	X\$18=		
ME	Independent +	19	Minus	2/	=	X	9=		OR	X78=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 	1	1260-	1	
	If the entry in column 11s less than the entry in column 2, write "0" in column 3.					L	30= ⊙т∧		OR	+260=		
If the entry in column 11s less than the entry in column 2, write "0" of dolumn 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE ADDIT. F												

FORM PTO-875 (Rev. 12/99)